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7590 12/13/2006

William W. Haefliger
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William W. Haefliger (Depositor's name)

William W. Haefliger (Signature)

January 23, 2007 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/718,058	11/21/2003	James J. Weber	12,554	9292

TITLE OF INVENTION: ARM SUPPORT IN SLING

01/26/2007 SDENBDB2 00000023 10718058

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APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$0	\$700	03/13/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
LEWIS, KIANDRA CHARLE	3772	602-020000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1 William W. Haefliger

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Weber Orthopedic Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Santa Paula, California

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

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A check is enclosed. Check #28804.
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

William W. Haefliger

Date

January 23, 2007

Typed or printed name

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17,120

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